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INTELLECTUAL PROPERTY LAW
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LOS ANGELES, CA 90025

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FACSIMILE COVER SHEET

Deliver to: Kiss, Eric B., USPTO Art Group: 2192
Facsimile No.: (571) 273-8300 Date: October 30, 2006
From: Brent E. Vecchia, Reg. No. 48,011
Our Docket No.: 42390P8130 Number of pages 14 including this sheet.
Application No.: 09/608,616 Filing Date: 6/30/2000
Enclosed are the following documents: Docket Due Date(s): 10/29/2006

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: <u>Non-Compliant</u> (<u>10</u> pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (____ pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: _____ (____ pgs) w/cover & abstract	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet (____ pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of <u>Facsimile</u>	<input type="checkbox"/> Reply Brief (____ pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (____ pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: ____ sheets, ____ figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: _____	<input type="checkbox"/> Response to Written Opinion (____ pgs)
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (____ pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

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Pat Sullivan 10/30/2006
Pat Sullivan Date

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/608,616
		Filing Date	June 30, 2000
		First Named Inventor	Jayashankar Bharadwaj
		Art Unit	2192
		Examiner Name	Kiss, Eric B.
Total Number of Pages in This Submission	14	Attorney Docket Number	42390P8130

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Facsimile Transmittal Sheet</div>
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Brent E. Vecchia, Reg. No. 48,011 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP	
Signature	<i>Brent E. Vecchia</i>	
Date	October 30, 2006	

CERTIFICATE OF MAILING/TRANSMISSION			
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Typed or printed name	Pat Sullivan		
Signature	<i>Pat Sullivan</i>	Date	October 30, 2006

Based on PTO/SB/21 (08-04) as modified by Blakely, Sokoloff, Taylor & Zafman (ndc) 10/12/2006
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FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Application Number	09/608,616
		Filing Date	June 30, 2000
		First Named Inventor	Jayashankar Bharadwaj
		Examiner Name	Kiss, Eric B.
		Art Unit	2192
TOTAL AMOUNT OF PAYMENT		(\$)	0.00
		Attorney Docket No.	42390P8130

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION																																																															
1. EXTRA CLAIM FEES																																																															
<table border="1"> <tr> <td>Total Claims</td> <td>27</td> <td>42*</td> <td>=</td> <td>0</td> <td>X</td> <td>50.00</td> <td>=</td> <td>\$0.00</td> </tr> <tr> <td>Independent Claims</td> <td>4</td> <td>8*</td> <td>=</td> <td>0</td> <td>X</td> <td>200.00</td> <td>=</td> <td>\$0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Total Claims	27	42*	=	0	X	50.00	=	\$0.00	Independent Claims	4	8*	=	0	X	200.00	=	\$0.00	Multiple Dependent									<table border="1"> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> </tr> <tr> <td>Fee Code (A)</td> <td>Fee Code (B)</td> <td></td> </tr> <tr> <td>1202 50</td> <td>2202 25</td> <td>Claims in excess of 20</td> </tr> <tr> <td>1201 200</td> <td>2201 100</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>1203 360</td> <td>2203 180</td> <td>Multiple Dependent claim, if not paid</td> </tr> <tr> <td>1204 790</td> <td>2204 395</td> <td>**Reissue independent claims over original patent</td> </tr> <tr> <td>1205 300</td> <td>2205 150</td> <td>**Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="2">SUBTOTAL (1)</td> <td>(B) 0.00</td> </tr> </table>	Large Entity	Small Entity	Fee Description	Fee Code (A)	Fee Code (B)		1202 50	2202 25	Claims in excess of 20	1201 200	2201 100	Independent claims in excess of 3	1203 360	2203 180	Multiple Dependent claim, if not paid	1204 790	2204 395	**Reissue independent claims over original patent	1205 300	2205 150	**Reissue claims in excess of 20 and over original patent	SUBTOTAL (1)		(B) 0.00											
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011
Signature	<i>Brent E. Vecchia</i>	Telephone	(303) 740-1980
		Date	10/30/06

Based on PTO/5B/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 12/15/2004.
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FEE TRANSMITTAL for FY 2005		<i>Complete if Known</i>	
<small>Patent fees are subject to annual revision.</small>		Application Number	09/608,616
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	June 30, 2000
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Jayashankar Bharadwaj
		Examiner Name	Kiss, Eric B.
		Art Unit	2192
0.00		Attorney Docket No.	42390P8130

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
27	42	0	\$0.00
Independent Claims	4	0	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
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SUBTOTAL (1)

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0.00

**or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

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Other fee (specify)

SUBTOTAL (2)

(\$)

Fee Paid

SUBMITTED BY

Name (Print/Type)	Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011	<i>Complete (if applicable)</i>	
Signature	<i>Brent E. Vecchia</i>	Telephone	(303) 740-1980	Date	10/30/06

Based on PTO/59/17 (12-04-ee) modified by Blakely, Sokoloff, Taylor & Zafman (w/1) 12/15/2004.
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Our Docket No: 42390P8130

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
)	
Bharadwaj et al.)	Examiner: Kiss, Eric B.
)	
Application No.: 09/608,616)	Art Unit: 2192
)	
Filed: June 30, 2000)	
)	
For: User Transparent Continuous)	
Compilation)	

RESPONSE TO NOTICE OF NON-COMPLAINT AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed 09/29/2006, the Applicants respectfully request that the Examiner enter the following amendments and consider the following remarks.

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that I am causing the above-referenced correspondence to be transmitted via facsimile to the United States Patent and Trademark Office at (571) 273-8300 on the date indicated below:

October 30, 2006

Date of Transmission

Pat Sullivan

Name of Person Transmitting Correspondence

Signature

Pat Sullivan

10/30/2006

Date

Atty Docket No. 42P8130
Application No. 09/608,616

1